Access this form via website at: www.hawaii.gov/dcca/areas/pvl

Briefly, the requirements for a license are:

- 1) Be not less than 18 years of age;
- 2) Have a good reputation for honesty, truthfulness, financial integrity and fair dealing;
- 3) Have 4 years of supervisory experience within the past 10 years;
- 4) Pass an examination in the appropriate classification;
- 5) Have liability and worker's compensation insurance; and
- 6) If a corporation, partnership, joint venture, LLC or LLP, have in your employ a licensed individual who is designated Responsible Managing Employee (RME). If a RME, be employed by a licensed contracting entity.

This is the general licensure process and what you may expect after filing an application:

- 1) Applicant files application, fee and other required items by the **20th** day of the month.
- 2) Board reviews complete applications the following month.
- 3) Board notifies applicant of approval/disapproval/deferral.
- 4) Approved applicant registers with a separate testing agency for exam and pays testing agency exam fees.
- 5) Applicant takes exam the following month.
- 6) Upon passing the exam, board notifies individuals of license requirements.
- 7) Applicant submits license requirements.
- 8) Board issues license to applicant.
- 9) Maintain license.

APPLICATION FILING DEADLINE

Application, fee and all supporting documents to be presented to the board must be received in the board's Honolulu office on or before the 20th day of the month prior to the scheduled meeting date. The board is scheduled to meet once a month, except for the month of December. Refer to the attached "Annual Schedule" for all dates.

Filing an Application

There are 3 types of applications: 1)

-) Sole Proprietor
- 2) Corporation, partnership, joint venture, LLC or LLP
- 3) RME

Each application must be accompanied with the following items for consideration by the board:

Type of Application

1) Sole Proprietor

Items Required
Application

Fee

Trade name registration, if applicable

Experience certificates Financial statement Credit report Tax clearance

2) <u>ENTITIES:</u> Application

Corporation, Fee

Partnership, Financial statement

Joint Venture, Credit reports of each officer/partner/manager/member and RME

LLC or LLP Tax clearance

Trade name registration, if applicable

RME appointment Entity registration

3) RME Application

Fee

Experience certificates

Credit report Entity appointment

Detailed instructions for submitting each of the items are on the next page. Submit all items listed for the type of application you will be filing. **FAX COPIES WILL NOT BE ACCEPTED.**

CT-00 0305R

INSTRUCTIONS FOR FILING

APPLICATION

Complete all 4 pages of the application.

Failure to provide all the requested information will delay the processing of your application.

An entity, corporation, partnership, joint venture, LLC or LLP cannot be issued a license without having in its employ a principal responsible managing employee (RME). The corporation, partnership, joint venture, LLC or LLP must file a separate application from a RME and both must pay separate fees in order to be licensed.

FEES

Attach the \$50 application fee which is not refundable for each application filed. Additional fees will be assessed after board approval and passage of the examination. Make checks payable to: COMMERCE AND CONSUMER AFFAIRS.

Note: One of the numerous legal requirements that you must meet in order for your new license to issue is the payment of fees as set forth in this application. You may be sent a license certificate before the check you sent us for your required fees clears your bank. If your check is returned to us unpaid, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$15.00 service fee will be charged for checks which are returned by the bank.

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Title 16, Chapter 201, Hawaii Administrative Rules, and/or Chapter 91 Hawaii Revised Statutes. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

EXPERIENCE

<u>Submit</u> not less than 3 certificates in support of supervisory experience <u>with application</u>. (No two certificates shall be from the same person.) All certificates must be notarized.

A minimum of 4 years of full-time supervisory experience within the past 10 years immediately preceding the filing of an application is required.

Applicants who possess licensed experience in another state should provide proof of licensure, but will still be required to submit not less than 3 certificates in support of supervisory experience.

Certain technical training or business administration training may be approved as acceptable experience, but in no case shall the training count for more than one year of experience.

ASBESTOS CONTRACTOR

Contracting entities applying to do asbestos application, enclosure, removal, encapsulation, renovation, repair demolition or other disturbances of friable asbestos or asbestos containing material shall meet all requirements with the exception of experience.

In lieu of experience, the contracting entity (individual, corporation, partnership, joint venture, LLC or LLP) shall submit proof of successful completion by the applicant, RME and all asbestos abatement employees of the contracting entity of Environmental Protection Agency (EPA) or board approved courses. Individuals or RMEs shall have taken a 4-day course; abatement workers shall have taken a 3-day course within two years prior to filing the application.

FINANCIAL STATEMENT

<u>Submit</u> a current financial statement (not more than a year old) prepared and signed by a registered or certified public accountant holding a current permit to practice. If licensed in another state, <u>provide</u> copy of license.

SIGNATURE OF APPLICANT IS REQUIRED ON FINANCIAL STATEMENT WHETHER ACCOUNTANT USES OUR FORM OR THEIR OWN.

CREDIT REPORT

<u>Submit</u> a current credit report for each officer, partner, manager, member, RME and individual sole owner (from a credit reporting agency **issued not more than 6 months ago**) covering at least the previous 5 years. Out-of-state applicants may apply for a credit report from a retail credit bureau in their area. If a partner or member is a business entity, submit business entity's credit report (i.e. Dun & Bradstreet report) or credit reports on the entity's officers.

TAX CLEARANCE

<u>Submit</u> a current Hawaii State Tax Clearance (not more than 6 months old) with an original State Department of Taxation stamp. (Not applicable to people residing in Hawaii less than 1 year and not applicable to corporations, partnerships, LLCs or LLPs registered in Hawaii less than 1 year).

TRADE NAME

If you are planning to use a trade name, <u>submit</u> a filed-stamped copy of current trade name registration approved by the Business Registration Division of the Department of Commerce and Consumer Affairs.

ENTITY REGISTRATION: CORPORATION/PARTNERSHIP LLC or LLP

If the application is for a corporation, partnership, LLC or LLP we will require the following proof to show that the entity is properly registered with the Business Registration Division (BREG), Department of Commerce and Consumer Affairs, State of Hawaii, P.O. Box 40, Honolulu, Hawaii 96810. (Please call them for the proper forms at (808) 586-2727) or visit their website at: www.businessregistrations.com/home.html to order Certificates of Good Standing, forms, etc.

If the entity has been registered in this state for LESS THAN ONE (1) YEAR, <u>ATTACH</u> a "filed-stamped" copy of the document filed with BREG; or the same certificate mentioned below.

If the entity has been registered in this state for MORE THAN ONE (1) YEAR, <u>ATTACH</u> a current "Certificate of Good Standing" or "Certificate of Qualification" issued not more than 1 year ago.

RME/ENTITY APPOINTMENT

<u>RME not licensed in Hawaii:</u> File a separate application as a RME. If entity is already licensed, entity must submit a letter confirming RME employment.

<u>RME licensed in Hawaii:</u> Have RME submit a letter confirming employment with new entity and confirming termination of present status. If the new entity <u>does not</u> request to be licensed with **all** of your active classes, they will be placed on <u>inactive</u> status.

Sole proprietor licensed in Hawaii and incorporating, forming a partnership, LLC or LLP: When a licensed individual changes to a partnership, incorporates, or forms a LLC or LLP, submit a letter with the application stating change in status from sole proprietor to RME of new entity.

LAWS AND RULES

A copy of the Contractors laws and rules may be obtained by submitting a written request to: Contractors License Board, DCCA, P.O. Box 3469, Honolulu, Hawaii 96801. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Act should be read in conjunction with the above statutes.

The laws and rules are also available on our website at: www.hawaii.gov/dcca/areas/pvl. Look under "Contractors".

BOARD'S ADDRESS

Mail the completed application, proper fee amount and other required documents to:

Contractors License Board
DCCA, PVL Licensing Branch
P.O. Box 3469
Honolulu, HI 96801

Deliver to office location at: 335 Merchant St., Room 301 Honolulu, HI 96813 Phone: (808) 586-3000

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

CONTRACTORS EXAM/BOARD MEETING SCHEDULE - 2005

Application Filing Deadline	Board Meeting	Experior Filing Deadline	Experior Examination Dates	
NO BOARD MEETING IN DECEMBER		January 3, 2005	January 13**, 14*, 2005	
December 20, 2004	January 21, 2005	February 4, 2005	February 17**, 18*, 2005	
January 20, 2005	February 18, 2005	March 4, 2005	March 24**, 25*, 2005	
February 20, 2005	March 18, 2005	April 8, 2005	April 21**, 22*, 2005	
March 20, 2005	April 22, 2005	May 6, 2005	May 26**, 27*, 2005	
April 20, 2005	May 20, 2005	June 10, 2005	June 23**, 24*, 2005	
May 20, 2005	June 24, 2005	July 8, 2005	July 21**, 22*, 2005	
June 20, 2005	July 22, 2005	August 5, 2005	August 18**, 19*, 2005	
July 20, 2005	August 26, 2005	September 9, 2005	September 22**, 23*, 2005	
August 20, 2005	September 23, 2005	October 7, 2005	October 20**, 21*, 2005	
September 20, 2005	October 21, 2005	November 4, 2005	November 17**, 18*, 2005	
October 20, 2005	November 18, 2005	December 2, 2005	December 15**, 16*, 2005	
NO BOARD MEETING IN DEC	EMBER	(Not available)		

^{*} All Islands (includes Oahu)

^{**} Oahu only

CLASSIFICATIONS AS LISTED IN CHAPTER 77

HAWAII ADMINISTRATIVE RULES

"A"	General Engineering
"B"	General Building
C-1	Acoustical and insulation contractor;
C-2	Mechanical insulation contractor;
C-3	Asphalt paving and surfacing contractor;
C-3a	Asphalt concrete patching, sealing, and striping contractor;
C-3b	Play court surfacing contractor;
C-4	Boiler, hot-water heating, and steam fitting contractor;
C-5	Cabinet, millwork, and carpentry remodeling and repairs contractor;
C-5a	Garage door and window shutters contractor;
C-5b	Siding application contractor;
C-6	Carpentry framing contractor;
C-7	Carpet laying contractor;
C-9	Cesspool contractor;
C-10	Scaffolding contractor;
C-12	Drywall contractor;
C-13	Electrical contractor;
C-14	Sign contractor;
C-15	Electronic systems contractor;
C-15a	Fire and burglar alarm contractor;
C-15b	Telecommunications contractor;
C-16	Elevator contractor;
C-16a	Conveyor systems contractor;
C-17	Excavating, grading, and trenching contractor;
C-19	Asbestos contractor;
C-20	Fire protection contractor;
C-20a	Fire repressant systems contractor;
C-21	Flooring contractor;
C-22	Glazing and tinting contractor;
C-22a	Glass tinting contractor;
C-23	Gunite contractor;
C-24	Building moving and wrecking contractor;
C-25	Institutional and commercial equipment contractor;
C-27	Landscaping contractor;
C-27a	Hydro mulching contractor;
C-27b	Tree trimming and removal contractor;
C-31	Masonry contractor;
C-31a	Cement concrete contractor;
C-31b	Stone masonry contractor;
C-31c	Refractory contractor;
C-31d	Tuckpointing and caulking contractor;
C-31e	Concrete cutting, drilling, sawing, coring, and pressure grouting contractor
C-32	Ornamental, guardrail, and fencing contractor;
C-32a	Wood and vinyl fencing contractor;
C-32a	Painting and decorating contractor;
C-33a	Wall coverings contractor;
C-33a	Taping contractor;
C-33c	Surface treatment contractor;
0- 330	ounace rearrient contractor,

C-34 Soil stabilization contractor;

- C-35 Pile driving, pile and caisson drilling, and foundation contractor;
- C-36 Plastering contractor;
- C-36a Lathing contractor;
- C-37 Plumbing contractor;
- C-37a Sewer and drain line contractor;
- C-37b Irrigation and lawn sprinkler systems contractor;
- C-37c Vacuum and air systems contractor;
- C-37d Water chlorination and sanitation contractor;
- C-37e Treatment and pumping facilities contractor;
- C-37f Fuel dispensing contractor;
- C-38 Post tensioning contractor;
- C-40 Refrigeration contractor;
- C-40a Prefabricated refrigerator panels contractor;
- C-41 Reinforcing steel contractor;
- C-42 Roofing contractor;
- C-42a Aluminum and other metal shingles contractor;
- C-42b Wood shingles and wood shakes contractor;
- C-42c Concrete and clay tile contractor;
- C-42e Urethane foam contractor;
- C-42g Roof coatings contractor;
- C-43 Sewer, sewage disposal, drain, and pipe laying contractor;
- C-43a Reconditioning and repairing pipeline contractor;
- C-44 Sheet metal contractor;
- C-44a Gutters contractor;
- C-44b Awnings and patio cover contractor;
- C-48 Structural steel contractor;
- C-48a Steel door contractor;
- C-49 Swimming pool contractor;
- C-49a Swimming pool service contractor;
- C-49b Hot tub and pool contractor;
- C-51 Tile contractor;
- C-51a Cultured marble contractor;
- C-51b Terrazo contractor;
- C-52 Ventilating and air conditioning contractor;
- C-53 Miscellaneous retail products;
- C-54 Interior design;
- C-55 Waterproofing contractor;
- C-56 Welding contractor;
- C-57 Well contractor;
- C-57a Pumps installation contractor;
- C-57b Injection well contractor;
- C-60 Solar power systems contractor;
- C-61 Solar energy systems contractor;
- C-61a Solar hot water systems contractor;
- C-61b Solar heating and cooling systems contractor;
- C-62 Pole and line contractor;
- C-62a Pole contractor;
- C-63 High voltage electrical contractor; and
- C-68 Classified specialist.

LICENSE REQUIREMENTS Upon Passing the Exam (Individual) or Receiving Board Approval (Corporation/Partnership/LLC/LLP)

WORKER'S COMPENSATION INSURANCE

<u>Worker's Compensation</u> - Submit a certificate of worker's compensation insurance from an insurance company authorized to do business in this State, and a statement from the insurance carrier that the board will be notified of any withdrawal, termination, or cancellation of the insurance.

Sole proprietor or partnership with <u>NO</u> employees may file a form prescribed by the board, in lieu of worker's compensation insurance.

LLC's with no employees may file written verification of exclusion from the State Dept of Labor and Industrial Relations in lieu of workers' compensation insurance.

Corporations may file a form prescribed by the board in lieu of worker's compensation insurance WHEN the RME owns at least 50% of the corporation and there are NO OTHER EMPLOYEES.

Joint Ventures must file worker's compensation certificates.

LIABILITY AND PROPERTY DAMAGE INSURANCE

Submit a certificate of insurance from an insurance company or agency authorized to do business in this State, showing full policy coverage of the applicant for comprehensive personal injury and property damage liability with the following minimum limits of liability:

Bodily Injury Liability \$100,000 each person

\$300,000 each occurrence

Property Damage Liability \$ 50,000 each occurrence

OUT-OF-STATE CONTRACTORS: The Board will accept **liability** insurance from a non-admitted carrier, if the producer qualifies for an exemption under HRS §431:9A-104(b)(6).

PLACE OF BUSINESS

A licensed contractor shall have and maintain a definite place of business where the licensee may be served notice and legal process in the State and shall display therein his contractor's license. Post Office Box number is not accepted as a place of business.

FEES

License fees will be due. Specific amounts will be given at the appropriate time.

ENTITY-RME DEPENDENCY

A corporation, partnership, joint venture, LLC or LLP cannot be issued a license without having in its employ a responsible managing employee (RME). The entity must file a separate application from a RME and both must pay separate fees in order to be licensed.

ATTENTION: CONTRACTORS APPLYING FOR ELECTRICAL OR PLUMBING RELATED CLASSIFICATIONS

Please be advised that in order to perform **electrical or plumbing** work in Hawaii, **you must also obtain an electricians (ie. ES or EJ) or plumbers (PM or PJ) license <u>OR</u> hire someone with the appropriate license. (Refer to Hawaii Revised Statutes Chapter 448E). YOU MAY NEED THIS TYPE OF LICENSE TO GET A BUILDING PERMIT.**

MAINTAINING THE LICENSE

MAINTAIN INSURANCE

Maintain insurance coverage throughout licensure and keep on file in the board's office evidence of such coverage.

Failure to maintain liability property damage and worker's compensation coverages causes automatic forfeiture of license, and if continuous coverage is not reinstated within sixty days, shall require the person/entity to apply as a new applicant.

ENTITY-RME DEPENDENCY

If for any reason the Responsible Managing Employee leaves the contracting entity, the contracting entity must notify the board within <u>60 days</u> and file an application for a new RME or place the entity's license on inactive status within <u>90 days</u> of RME leaving contracting entity. Failure to notify the board and apply for a new RME or place the license on inactive status within the required time period causes the license to be **FORFEITED** automatically.

RMEs who leave an entity shall notify the board within <u>60 days</u> and apply to become a contracting entity, obtain employment with another contracting entity or instruct the board to place the license on an inactive status within <u>90 days</u>. Failure to do so within the required time period will cause *automatic forfeiture* of the license.

PLACE OF BUSINESS

Maintain a place of business.

BIENNIAL RENEWAL

All licenses, regardless of issuance date, are subject to renewal by **September 30 of each even-numbered year.** To ensure receipt of a renewal application, keep the board informed of your address. Applications are sent by mail around August 15, even-numbered years. Licenses not renewed by September 30 are forfeited and the holders of a forfeited license are considered unlicensed and may not practice. Restorations of forfeited licenses are accepted until November 30 with a penalty fee. After November 30, restoration is <u>not</u> accepted and a new application for a license is required.

STATE OF HAWAII DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

CONTRACTORS LICENSE BOARD

335 MERCHANT ST, ROOM 301, P.O. BOX 3469 HONOLULU, HAWAII 96801

APPLICATION FOR CONTRACTOR'S LICENSE

Access this form via website at: www.hawaii.gov/dcca/areas/pvl

INSTRUCTIONS - To avoid delay read all instructions			ns carefully.	carefully.		Lic. No.	Eff. Date:
Each applicable question must be fully and truthfully ans misrepresentation is grounds for refusal or subsequ		swered. Any mate uent revocation of	rial license.	ا د	CLASS(ES):		
Attach sheets to this application when so instructed or wanswer is not sufficient.			where the space pro	vided for the	BOARD USE ONLY		
Answer all completed	questions. No license d. If a question is not ap	will be considered upplicable, indicate with	until this applicatio "NA."	on is	OARD (
Application	ns must be printed in bl	lack ink or typewritte	en.		FOR B		
The require form.	ed \$50.00 application f	fee must be attached	and submitted with	this application	Щ		
] [cate the type of applicat Responsible Manag Individual (sole owner Corporation Partnership Joint Venture LLC LLP	ing Employee (RME)		n)ss:			
(B) Nan	ne of Applicant	(Give nan	ne of nerson, cornor	ration partnershin	ioint	venture, LLC or LLP)	
(0) -		,				,	
(C) Trac	de Name or Business N	lame (if any)					
(D) Soc	ial Security No			Phone	(days):	
(E) • M	lailing Address	_					_
		,	Street address or P.	O. Box, City, State	te, Zip	Code)	
• H	awaii Business Address	S	Street address, City	. Zip Code)			
an a C a L a F	RSONNEL OF APPLICATION INDIVIDUAL CORPORATION IMITED LIABILITY COPARTNERSHIP/JOINT RME	ANT - If applicant is: MPANY (LLC) VENTURE/LLP		Provide in the INI all the all the all the	DIVID OFFI MAN PART		nd the RME
	Full Name (First-Midd	lle-Last)	Title or Position	(Gi	ive <u>Lo</u>	Residence Addres cation. P.O. Box not	
(G) Set	forth in detail the kind o	f contracting business	in which the applications	ant intends to eng	age _		
(H) Clas	ssification requested (Sym) nbol - See list attached		Name of	classific	eation	
	Entity: 		\$200 \$150 \$10 \$55/\$110	CRF . 1/2 R	en		5/\$110 5

Nan	ne of Applicant:
(I)	EACH QUESTION MUST BE ANSWERED
1.	Are you at least 18 years of age?
2.	Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States?
3	(a) State the date and the name of the entity under which the applicant first started in the business of contracting in the State of Hawaii.
	(b) Have you ever applied for a Hawaii State contractor's license? If yes, state month and year
4.	Provide name, classification, number, date and copy of each contractor's license previously held in any State by any person listed under "Personnel of Applicant" or held by any organization in which any such person was a copartner or corporate officer, manager, or member.
5.	Has any person listed under "Personnel of Applicant" been affiliated with a contracting entity whose license has been terminated due to issuance of a court order authorizing payment from the Contractors Recovery Fund of their state or any other state? If yes, submit a detailed statement giving the date of the order and circumstances leading up to issuance of the court order.
6.	Has any person listed under "Personnel of Applicant" or has any construction organization in which any such person was a member of the personnel, had a contractor's license or any professional or vocational license denied, fined, suspended or revoked by this State or any other State? If yes, attach a detailed statement. (For the purpose of this question, "denied" does not mean that one has previously failed an examination.)
7.	Has any bonding or surety company ever completed or made a financial settlement upon any construction contract or work undertaken by any person listed under "Personnel of Applicant" or any construction organization in which any such person was a member of the personnel? If yes, attach a detailed statement.

8	 Are there now any unpaid past due bills or of operations of any person listed under "Person member of the personnel? 	onnel of Applicant" or any construction	n organization in which any	•
ç	Are there now any liens, suits, or judaments	of record or pending, outstanding and	d unsatisfied, as a result of the	e operations of any

person listed under "Personnel of Applicant" or any construction organization in which any such person was a member of the

personnel? ______ If yes, attach a detailed statement.

(J) EDUCATION: Vocational school, college, university, special training	yrs.	mos.
(K) EXPERIENCE STATEMENT		
1) TYPE OF WORK & TIME AT EACH-I have worked as a: [] Apprentice for	nt on projects	
4) LIST THE MOST RECENT EXPERIENCE FIRST:		
Name of Company License No. Type of Business Company Engaged in Address of Company Dates employed: Mo/Yr Dates supervised: Mo/Yr No. of people supervised: TYPE OF PROJECTS: [] Apartments [] Condominiums [] Custom [] Tract Houses [] High Rise [] Other (specify): Describe duties and responsibil Hours worked per week: Yr/Mo AVERAGE SIZE OF COMPLETED PRO that will describe physical dimension): AVERAGE GROSS DOLLAR VALUE O \$	DJECTS (Give square foc	
Name of Company License No. Type of Business Company Engaged in Address of Company Dates employed: Mo/Yr Mo/Yr Mo/Yr Total: Yr/Mo Dates and responsibil Hours worked per week: Yr/Mo	ties:	
Dates supervised:		
Name of Company License No. Type of Business Company Engaged in Address of Company Dates employed: Mo/Yr Dates supervised: Total: Total: Total: Total: Total:	ities:	
No. of people supervised: TYPE OF PROJECTS: [] Apartments [] Condominiums [] Remodeling [] Custom [] High Rise [] Other (specify):		

ATTACH ADDITIONAL SHEETS IF NECESSARY

SIGNATURE IS REQUIRED ON NEXT PAGE

The undersigned hereby applies for license pursuant to the provisions of Chapter 444, Hawaii Revised Statutes and vouches for the accuracy of all statements, answers and representations made in this application, including all supplementary statements hereto attached.			
Owner, partner, officer of a corporation, manager or member of LLC, responsible managing employee	Owner, partner, officer of a corporation, manager or member of LLC, responsible managing employee		
Date Signature			
Title			
Date Signature			
Title			
Date Signature			
Title			
Date Signature			
Title			
This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to strequest.	ubmit youi		

Supporting certificates necessary to establish that the applicant's construction experience meets the minimum requirements must be

Additional certificate forms may be obtained from the office of the Board, 335 Merchant Street, Room 301, Honolulu, HI 96813 or you may download forms from our website at: www.hawaii.gov/dcca/areas/pvl.

attached to the application -- See instruction sheet.

Name of Applicant: _

CONTRACTORS FINANCIAL STATEMENT

(Prescribed Form)

Name of Application (percent composition, with its Trade Names, of any (obtain): Address Address ASSETTS CURRENT LIABALITIES COURRENT LIABALITIES COURRENT LIABALITIES COURRENT LIABALITIES COURRENT LIABALITIES COURRENT LIABALITIES SOURCE, COURRENT LIABALITIES LIABALITIES SOURCE, COURRENT LIABALITIES LIABALITIES LIABALITIES SOURCE, COURRENT LIABALITIES LIABALITI		Financial State	ment as of	, 20 (not more than one year old) is for:		
ASSETS CURRENT LASS.TIES CURRENT LASS.TIES CURRENT LASS.TIES COSH (PLANK) crossing Services account To control response For the response of the response		Name of Applicant (owner, corporati	on, etc.):			
ASSETS CURRENT LASS.TIES CURRENT LASS.TIES CURRENT LASS.TIES COSH (PLANK) crossing Services account To control response For the response of the response		Trade Name, if any (dba):				
ASSETS						
CURRENT LABILITIES: Cash pixols drawing Saving account) 3		, ida 1000.				
Clash (Pucker Cocked) S To bester seguine S Services account To bester seguine S Services account To other seguine S Services account To Tool Account S Services account To Tool Account S Services account Tool Account S Services account Tool Account S Services account S		ASSETS:		LIA	BILITIES:	
Source and Control of the Control of Control	CURRENT ASSETS:			CURRENT LIABILITIES:		
Selenge account Time confrictions Time confrictions To de decidions of Time confrictions To de decidions of Time confrictions To de decidions of To decidions of the decidions of the decidions of To decidions of the decidions of	,	Φ.				
Time conflications (owthin 1 year)	accounty	<u> </u>		·		
Comment Property	•					
Depose with sides TOTAL CACRET S Accounts repositives Subcontended Accounts repositives Subcontended Accounts repositives Subcontended Contraval) Material men Contraval) Material men Contraval) TOTAL ACCOUNTS PAYABLE S CONTRAVABLE S CONT				·		
Account populate: Account populate: Subcombine (completed Contract) Marketial men. Others. Others	, , ,			• • • •	 \$	
Accounts receivable (comprehed to control receivable (control rece	·	\$				
Contracts)					\$	
Earned estimated and retainage (procompleted contractan) (procompleted						
Other accounts receivable. Work in progress (unfalled). Accrued psyrute. Accrued psyrute. Federal and state increme tax. Payrul taxes (not without state increme tax. Payrul taxes (not without state increme tax. Suck and bonds. Suck and bonds. Other cornent assets. Other accrued toxes, interest, etc. TOTAL CURRENT ASSETS. Other accrued toxes, interest, etc. OTHER ASSETS. Material in stock (not included) In any Atems action on . In a seasts. Other accrued toxes, interest, etc. OTHER CURRENT LIABILITIES (specify): In any Atems action on. In a seasts. TOTAL CURRENT LIABILITIES. Suck and toxes on the control of the seast of the se	,			Others		
Work in progress (unbilled) Notes recovered to progress (unbilled) Notes recovered to the second t	(uncompleted contracts)	<u>-</u>		TOTAL ACCOUNTS PAYABLE	\$	
Notes receivable Federal and state income tax. Stocks and bonds Payroll taxes (including FLCA SUL and rotone texas withhold) SUL and rotone texas withhold SUL and rotone texas without SUL and rotone texas withhold SUL and rotone	Other accounts receivable			Current maturities (long-term debt)	\$	
Slocks and bonds. Life insurance (cash value)	Work in progress (unbilled)			Accrued payrolls		
Life insurance (cash value) Other corrund tassets Other accrued taxes, interest, etc. TOTAL CURRENT ASSETS S OTHER ASSETS Within 1 year) Inventory or other materials Other accrued taxes, interest, etc. TOTAL CURRENT LIABILITIES (specify): TOTAL CURRENT LIABILITIES S TOTAL CURRENT LIABILITIES TOTAL CURRENT LIABILITIES TOTAL OTHER ASSETS Long-term debt (fees portion due within one year) S Asset assets Equipment at net book value S Asset Encumbrances on equipment (Aue after 1 year) Total ASSETS S Other accessed cost on Uncompleted contracts TOTAL FIXED ASSETS S Other individed one is a set of the cost of the c	Notes receivable			Federal and state income tax		
Other accrued taxes, interest, etc. TOTAL CURRENT ASSETS S	Stocks and bonds			Payroll taxes (including F.I.C.A.		
TOTAL CURRENT ASSETS \$ Encumbrances on equipment (due within 1 year)	Life insurance (cash value)			S.U.I. and income taxes withheld)		
OTHER ASSETS: Material in stock (not included in any items above) inventory of other materials. Other assets TOTAL CURRENT LIABILITIES (specify): inventory of other materials. Other assets TOTAL CURRENT LIABILITIES S LONG-TERM LIABILITIES FIXED ASSETS: Long-term detx (lass portion alter within one year) Real estate. Encumbrances on equipment (due after 1 year) Look value Encumbrances on real estate. Dook value Encumbrances on real estate. TOTAL DASSETS S Other fixed assets. TOTAL EXED ASSETS S Other long-term liabilities (specify): TOTAL FIXED ASSETS S Other long-term liabilities (specify): TOTAL LABILITIES S TOTAL LABILITIES TOTAL LABILIT	Other current assets			Other accrued taxes, interest, etc.		
Material in stock (not included in any items above)	TOTAL CURRENT ASSETS		<u>\$</u>	Encumbrances on equipment (due		
in any items above)	OTHER ASSETS:			within 1 year)		
Inventory or other materials. Other assets. TOTAL OTHER ASSETS: Equipment at net book value. \$ LONG-TERM LIABILITIES: Equipment at net book value. \$ due within one year). Encumbrances on equipment Furniture and foutures at net Lond-affer of the year). Encumbrances on real estate. Encumbrances on real estate. Billings in excess of cost on Uncompleted contracts. Other fixed assets. TOTAL FIXED ASSETS. \$ Other long-term liabilities (specify): TOTAL FIXED ASSETS. \$ Other long-term liabilities (specify): TOTAL LIABILITIES. \$ NET WORTH: Capital stock (if corporation, show shares authorized, issued-par value) \$ \$ Surplus. TOTAL LASSETS. \$ TOTAL LASSETS. \$ TOTAL LASSETS. \$ TOTAL LASSETS. \$ TOTAL LASSETIES AND NET WORTH. TOTAL LASSETS. \$ TOTAL LASSETS. \$ TOTAL LASSETIES AND NET WORTH. TOTAL LASSETS. \$ TOTAL LASSETS. \$ TOTAL LASSETIES AND NET WORTH. \$ SIGNATURE OF APPLICANT: TITLE (owner, president, etc.): TITLE (owner, president, etc.):	Material in stock (not included			OTHER CURRENT LIABILITIES (specify):		
TOTAL OTHER ASSETS. \$ LONG-TERM LIABILITIES: FIXED ASSETS: Long-term date (tess portion due within one year). Real estate. Furniture and flutures at net book value. S Encumbrances on equipment (due after 1 year). S Billings in excess of cost on Uncompleted contracts. TOTAL FIXED ASSETS. \$ Other long-term liabilities (specify): TOTAL LONG-TERM LIABILITIES. \$ TOTAL LONG-TERM LIABILITIES. S TOTAL LABILITIES. S TOTAL LONG-TERM LIABILITIES. S TOTAL LIABILITIES. S TOTAL LIABILITIES. S TOTAL LIABILITIES AND NET WORTH. S TOTAL LIABILITIES. S TOTAL LIABILITIES.						
TOTAL OTHER ASSETS. Equipment at net book value \$						
FIXED ASSETS: Equipment at net book value \$			e			<u> </u>
Equipment at net book value			Ψ			
Real estate		\$			\$	
Furniture and fixtures at net book value					<u>*</u>	
book value				• •		
Total Fixed assets						
Other fixed assets						
Other long-term liabilities (specify): TOTAL LONG-TERM LIABILITIES TOTAL LIABILITIES NET WORTH: Capital stock (if corporation, show shares authorized, issued-par value) Surplus TOTAL ASSETS TOTAL NET WORTH TOTAL ASSETS TOTAL ASSETS This statement must be signed, whether accountant uses this form or his own. I hereby certify as owner, officer, partner, manager, member or R.M.E. that the statements contained on this statement are true and correct. I understand that misrepresentation is grounds for refusal or sub revocation of license (Sec. 710-1017, Hawaii Revised Statutes). SIGNATURE OF APPLICANT: TITLE (owner, president, etc.):				•		
TOTAL LONG-TERM LIABILITIES			<u>\$</u>			
TOTAL LIABILITIES						
TOTAL LIABILITIES						
Capital stock (if corporation, show shares authorized, issued-par value) Surplus				TOTAL LONG-TERM LIABILITIES		<u>\$</u>
Capital stock (if corporation, show shares authorized, issued-par value) Surplus				TOTAL LIABILITIES		<u> </u>
shares authorized, issued-par value) Surplus				<u>NET</u>	WORTH:	
Surplus				Capital stock (if corporation, show		
TOTAL NET WORTH				shares authorized, issued-par value)	\$	
TOTAL LIABILITIES AND NET WORTH				Surplus		
This statement must be signed, whether accountant uses this form or his own. I hereby certify as owner, officer, partner, manager, member or R.M.E. that the statements contained on this statement are true and correct. I understand that misrepresentation is grounds for refusal or sub revocation of license (Sec. 710-1017, Hawaii Revised Statutes). SIGNATURE OF APPLICANT:				TOTAL NET WORTH		<u>\$</u>
This statement must be signed, whether accountant uses this form or his own. I hereby certify as owner, officer, partner, manager, member or R.M.E. that the statements contained on this statement are true and correct. I understand that misrepresentation is grounds for refusal or sub revocation of license (Sec. 710-1017, Hawaii Revised Statutes). SIGNATURE OF APPLICANT:	TOTAL ASSETS		<u>\$</u>	TOTAL LIABILITIES AND NET WORTH		<u>\$</u>
I hereby certify as owner, officer, partner, manager, member or R.M.E. that the statements contained on this statement are true and correct. I understand that misrepresentation is grounds for refusal or sub revocation of license (Sec. 710-1017, Hawaii Revised Statutes). SIGNATURE OF APPLICANT: TITLE (owner, president, etc.):						
revocation of license (Sec. 710-1017, Hawaii Revised Statutes). SIGNATURE OF APPLICANT: TITLE (owner, president, etc.):			5 ,			
SIGNATURE OF APPLICANT: TITLE (owner, president, etc.):			that the statements contained	d on this statement are true and correct. I understand th	at misrepresentation is	grounds for refusal or subsequen
TITLE (owner, president, etc.):	,	,	CICNATURE OF ARI	DI ICANIT.		
3 - 4 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5						
SIGNATURE OF						
C.P.A. or P.A.: LICENSE NUMBER						
PRINT NAME: STATE	•					

SHALL BE PREPARED AND SIGNED BY A REGISTERED PUBLIC ACCOUNTANT OR CERTIFIED PUBLIC ACCOUNTANT HOLDING A CURRENT PERMIT TO PRACTICE. (IF LICENSED IN ANOTHER STATE, PROVIDE COPY OF A CURRENT LICENSE)